



# Conflicts of Interests Policy

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### POLICY AMENDMENTS

Amendments to the policy will be issued from time to time. A new amendment history will be issued with each change.

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## 1.0 Introduction

- 1.1 NHS Humber and North Yorkshire ICB (the ICB) is required to make arrangements to manage conflicts of interest. This policy sets out those arrangements, based on the following, taking account of the relevant statutory requirements and guidance documents outlined in Sections 21 and 22:
  - Guidance published previously by NHS England for CCGs taking responsibilities for Co-Commissioning of Primary Care Services.
  - Section 6 of the ICB Constitution.
  - Revised guidance published by NHS England in June 2016 and February 2017, effective 01 June 2017, with further guidance for ICBs issued February 2019.
- 1.2 Specific additional guidance with respect to providers of ICB commissioned services will be covered in the ICB's Procurement Policy.
- 1.3 In addition to the arrangements set out in this policy, the ICB will embody public service values and principles in all its business transactions as outlined in the Policy on Business Conduct.

## 2.0 Policy statement

- 2.1 NHS Humber and North Yorkshire ICB strives to achieve the highest standards of business conduct at all times and is committed to conducting its business with honesty and impartiality. One of the overriding objectives of the ICB is to ensure that decisions made by the ICB are both taken, and taken to be seen, without any possibility of the influence of external or private interest.

## 3.0 Impact analyses

### Equality

- 3.1 As a result of performing the screening analysis, the policy does not appear to have any adverse effects on people who share Protected Characteristics and no further actions are recommended at this stage. The results of the screening are attached at Appendix 1.

### Sustainability

- 3.2 A Sustainability Impact Assessment is not required for this policy.



## Bribery Act 2010

- 3.3 This policy is designed to contribute to the ICB's obligation to ensure adequate measures are in place to prevent acts of bribery within the meaning of the Bribery Act 2010.
- 3.4 The Bribery Act 2010 came into force in July 2011 and has particular relevance to this policy. The Act created four criminal offences:
- Bribery, or offering to bribe, another person (section 1).
  - Requesting, agreeing to receive, or accepting a bribe (section 2).
  - Bribing, or offering to bribe, a foreign public official (section 6).
  - Failing to prevent bribery (section 7).
- 3.5 It should be noted that there need not be any actual giving and receiving for financial or other advantage to be gained, to commit an offence.
- 3.6 The Act also increased the maximum penalty for bribery to 10 years' imprisonment, with an unlimited fine, or both. Furthermore, the Act introduced a 'corporate offence' of failing to prevent bribery by the organisation not having adequate preventative procedures in place.
- 3.7 Individuals may expose the organisation to a conviction punishable with an unlimited fine because the organisation may be liable where a person associated with it commits an act of bribery.
- 3.8 Individuals should also be aware that a breach of this Act, or of this policy, renders them liable to disciplinary action by the ICB whether or not the breach leads to prosecution. Where a material breach of this guidance is found to have occurred, the likely sanction will be loss of employment and superannuation rights.
- 3.9 Further information on the Bribery Act can be found at:  
<https://www.gov.uk/government/publications/bribery-act-2010-guidance>.

## 4.0 Scope

- 4.1 This policy applies to:

Members of the ICB and members of, and attendees at, its committees and sub-committees

All ICB employees, including:

- All full and part-time staff.



- Any staff on sessional or short-term contracts.
- Any students and trainees (including apprentices).
- Agency staff; and
- Seconded staff.

In addition, any self-employed consultants or other individuals working for the ICB under a contract for services should make a declaration of interest in accordance with this guidance, as if they were ICB employees.

- Members of the ICB: All members of the ICB's committees, sub-committees/sub-groups, including:
  - Co-opted members.
  - Appointed deputies; and
  - Any members of committees/groups from other organisations.

4.2 Where the ICB is participating in a joint committee alongside other ICBs, any interests which are declared by the committee members should be recorded on the register(s) of interest of each participating ICB.

4.3 Individuals working on behalf of NHS Humber and North Yorkshire ICB or providing services or facilities to the ICB will be made aware of their obligations with regard to declaring conflicts or potential conflicts of interest. This requirement will be written into contract documentation.

## 5.0 Policy purpose / aims and failure to comply

5.1 NHS Humber and North Yorkshire ICB recognises that conflicts of interest are unavoidable and therefore has in place arrangements to seek to manage them. The measures outlined in this policy are aimed at ensuring that decisions made by the ICB will be taken, and be seen to be taken, uninfluenced by external or private interests.

5.2 Breaches of this policy will be investigated and may result in the matter being treated as a disciplinary offence under the ICB's disciplinary procedure. Failure to adhere to the provisions of this policy may constitute a criminal offence of fraud, as an individual could be gaining unfair advantages of financial rewards for themselves, a family member or a close associate. Any suspicion that a relevant interest may not have been declared should be reported to the Senior Governance Lead.

5.3 Where disciplinary action is taken breach of this policy may be regarded as gross misconduct and result in the individual being dismissed or removed from office.



Where a failure to declare an interest has resulted in legal proceedings being taken against the organization, the person in breach of the policy may be joined as a respondent to such proceedings.

## 6.0 Principal legislation and compliance with standards

### Statutory Framework

#### 6.1 For ICBs, the starting point is Section 140 of the NHS Act 2006 which sets out minimum requirements, supplemented by the 2013 Regulations. ICBs must:

- Maintain appropriate registers of interests.
- Publish or make arrangements for the public to access those registers.
- Make arrangements requiring the prompt declaration of interests by the persons specified and ensure that these interests are entered into the relevant register.
- Make arrangements for managing conflicts and potential conflicts of interest (for example by developing and reviewing this policy).
- Have regard to guidance published by NHS England / Improvement in relation to conflicts of interest.
- Must not award a contract for the provision of NHS health care services where conflicts, or potential conflicts, between the interests involved in securing such services and the interests involved in providing them affect, or appear to affect, the integrity of the award of that contract; and
- Keep appropriate records of how conflicts of interest have been managed in individual cases in relation to NHS service contracts entered into, which must be published.

#### NHS / Department of Health Guidance

- Managing Conflicts of Interest: Revised Statutory Guidance for CCGs 2017 (which can be accessed here: <https://www.england.nhs.uk/wp-content/uploads/2017/02/guidance-managing-conflicts-of-interest-nhs.pdf>)
- Managing conflicts of interest where GP practices are potential providers of CCG- commissioned services, NHS England.
- Best Practice Update on Conflicts of Interest Management: call to Action for CCGs February 2019.



## Principles

6.2 The conflicts of interest arrangements are intended to be read and understood in conjunction with the following:

- The 7 principles of public life (known as the Nolan Principles as set out below)
- [The Good Governance Standards for Public Services \(2004\)](#), [Office for Public Management \(OPM\)](#)(T/A Traverse) and [Chartered Institute of Public Finance and Accountancy \(CIPFA\)](#).
- The seven key principles of the NHS Constitution [The NHS Constitution for England - GOV.UK \(www.gov.uk\)](#);
- [The Equality Act 2010 \(legislation.gov.uk\)](#);
- [The UK Corporate Governance Code](#).
- [Standards for members of NHS boards and CCG governing bodies in England](#).

### The Nolan Principles

- **Selflessness** – Holders of public office should act solely in terms of the public interest. They should not do so in order to gain financial or other benefits for themselves, their family or their friends.
- **Integrity** – Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might seek to influence them in the performance of their official duties.
- **Objectivity** – In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office should make choices on merit.
- **Accountability** – Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.
- **Openness** – Holders of public office should be as open as possible about all the decisions and actions they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.
- **Honesty** – Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.
- **Leadership** – Holders of public office should promote and support these principles by leadership and example.



## 7.0 Roles / Responsibilities / Duties

### 7.1 NHS Humber and North Yorkshire ICB

The ICB has ultimate responsibility for all actions carried out by staff and committees throughout the ICB's activities. This responsibility includes the stewardship of significant public resources and the securing of healthcare services to the local community.

### 7.2 The Audit Committee

The ICB Audit Committee is responsible for ensuring there is an effective system in place to manage and to protect the reputation of the ICB arising from conflicts or potential conflicts of interest. The Audit Committee will review the arrangements for the declaration and management of conflicts of interest and provide assurances, on a report highlighting issues to increase assurances, to the ICB that adequate systems and processes are in place to ensure compliance, especially in relation to the development of new services/contracts or changes to existing services / contracts

### 7.3 The Chief Executive

The ICB's Chief Executive has overall accountability for the ICB's management of conflicts of interest

### 7.4 The Conflicts of Interest Guardian

To further strengthen scrutiny and transparency of the ICB's decision making processes, all ICBs should have a Conflicts of Interest Guardian (akin to a Caldicott Guardian). This role should be undertaken by the ICB Audit Committee Chair, provided they have no provider interests, as Audit Committee Chairs already have a key role in conflicts of interest management. They should be supported by the ICB's Senior Governance Lead who should have responsibility for the day-to-day management of conflicts of interest matters and queries. The ICB's Senior Governance Lead should keep the Conflicts of Interest Guardian well briefed on conflicts of interest matters and issues arising.

### 7.5 The Conflicts of Interest Guardian should:

- Act as a conduit for members of the public who have concerns with regards to a conflict of interest.
- Be a safe point of contact for whistleblowing.
- Support the rigorous application of conflict-of-interest principles and policies.



- Provide independent advice and judgment where there is any doubt about how to apply conflicts of interest policies and principles in an individual situation.
- Provide advice on minimising the risks of conflicts of interest.

7.6 Whilst the Conflicts of Interest Guardian has an important role within the management of conflicts of interest, executive members of the ICB have an ongoing responsibility for ensuring the robust management of conflicts of interest, and all ICB employees and committee members will continue to have individual responsibility in playing their part.

### 7.7 **The Senior Governance Lead Responsibilities**

The Senior Governance Lead will oversee arrangements to ensure that the ICB's registers of interests are publicly accessible and will advise on how declarations of interest should be made and how interests are managed. They will also develop procedures for managing those interests that are common to a number of individuals or to specific activities of the ICB.

### 7.8 **Employees / Staff Working on Behalf of the Humber and North Yorkshire ICB**

Employees and staff working on behalf of the ICB should be aware that in any transaction undertaken in support of the NHS Humber and North Yorkshire ICB's functions (including conversations between two or more individuals, emails, correspondence and other communications), individuals must ensure, where they are aware of an interest, that they conform to the management arrangements for conflicts of interest.

7.9 Where someone is to be part of the tender evaluation panel or decision-making process regarding the award of the contract, any potential conflict of interest must be declared at the earliest opportunity. Failure to do so could result in the procurement process being declared invalid and possible suspension of the relevant individual from the ICB.

7.10 If in doubt, an individual should assume that a potential conflict of interest exists. Transparency demands that individuals are explicitly and clearly aware of their responsibilities and duties in this context. Should there be any doubt about the relevance of an interest, this should be discussed with the Chair of the ICB, Chair of the Audit Committee or the Senior Governance Lead, which will result in a recommended course of action.

7.11 The perception of a conflict of interest can be as damaging as an actual conflict of interest.



- 7.12 NHS Humber and North Yorkshire ICB employed staff are advised not to engage in outside employment which may conflict with their NHS work. They are advised to tell their employer if they think they may be risking a conflict of interest in this area and the declaration can be made on the form for declarations of interest.
- 7.13 All individuals covered by the scope of this policy are also required to declare any relevant personal or business interests of their spouse, civil partner, cohabitee, family member or any other relationship (including friendship) which may influence, or may be perceived to influence, their judgment.
- 7.14 Individuals must declare any interests, in writing, as soon as they are aware of it and in any event no later than 28 days after becoming aware. A form to be used for this purpose can be found [here](#).
- 7.15 Where an individual is unable to provide a declaration in writing, for example, if a conflict becomes apparent in the course of a meeting, they will make an oral declaration at the meeting, and provide a written declaration as soon as possible thereafter. The declaration will be minuted.
- 7.16 Even if an interest has already been declared, it should be declared at the start of any meeting where matters relating to that interest are discussed and this should be minuted.
- 7.17 Individuals applying for posts at the ICB or seeking appointment to the ICB and any of its committees and sub-committees will be required to declare any potential conflicts of interest during the appointment process. Where a question arises as to whether this may impact on the ability to appoint individuals, further guidance should be sought from the Conflicts of Interest Guardian, the ICB Chair or the Senior Governance Lead.

## 8.0 Managing conflicts of interest at meetings

- 8.1 The Chair of a meeting of the ICB or any of its committees or sub-committees has ultimate responsibility for deciding whether there is a conflict of interest and for taking the appropriate action in order to manage the conflict of interest.
- 8.2 In the event that the Chair of a meeting has a conflict of interest, the Deputy Chair is responsible for deciding the appropriate course of action in order to manage the conflict of interest. If the Deputy Chair is also conflicted, then the remaining non-conflicted voting members of the meeting should agree between themselves how to manage the conflict(s). In making such decisions, the Chair or Deputy Chair / remaining non-conflicted members may wish to consult with the Conflicts of Interest Guardian.



- 8.3 It is good practice for the Chair to proactively consider ahead of meetings any conflicts that are likely to occur and how they should be managed, including steps to ensure relevant supporting papers are not sent to conflicted individuals.
- 8.4 To support the Chair, they should be provided with a checklist of declaration of interests made by members / attendees prior to the meetings.
- 8.5 There should be a standing agenda item on every meeting agenda asking for declarations of interest. Each member / attendee of the meeting should declare any interests which are relevant to the business of the meeting, whether or not those interests have been previously declared. It is the responsibility of each individual member / attendee of the meeting to declare any interests.
- 8.6 Any new declarations identified at a meeting should be incorporated in the relevant ICB register of interests.
- 8.7 When a member / attendee of the meeting (including the Chair or Deputy Chair) has a conflict of interest in relation to one or more items of business to be transacted at the meeting, the Chair (or Deputy Chair / remaining non-conflicted members) must decide how to manage that conflict. This could include one or more of the following:
- Where the Chair has a conflict, deciding that the Deputy Chair or a non-conflicted member chair all or part of the meeting.
  - The individual not attending the meeting.
  - The individual not attending the relevant section of the meeting.
  - Noting the interest and ensuring all attendees are aware of the nature and extent but allowing the individual to participate in both the discussion and any decisions.
  - Ensuring the relevant person does not receive documentation and / or minutes in relation to the relevant matter.

## 9.0 Minute taking

- 9.1 Asking for declarations of interests to be declared should be a standing agenda item for the ICB, all committees and sub-committees after the Chair's Welcome and Introductions and Apologies.



9.2 If any conflicts of interest are declared or otherwise at a meeting, the Chair must ensure the following information is recorded in the minutes:

- Who has the interest.
- The nature of the interest and why it gives rise to a conflict, including the magnitude of any interest.
- The items on the agenda to which the interest relates.
- How the conflict was agreed to be managed; and
- Evidence that the conflict was managed as intended, i.e., recording the points during the meeting when particular individuals left or returned to the meeting.

9.3 An example for recording interests in committee minutes is included at Appendix 4.

## 10.0 Definitions

10.1 The NHS England “Managing Conflicts of Interest : Revised Statutory Guidance for CCGs” June 2017 Guidance on Managing Conflicts of Interest states that : “A conflict of interest is defined as ‘set of circumstances by which a reasonable person would consider that an individual’s ability to apply judgement or act, in the context of delivering, commissioning, or assuring taxpayer funded health and care services is, or could be, impaired or influenced by another interest they hold”. A potential for competing interests and / or a perception of impaired judgement or undue influence can also be a conflict of interest.

10.2 An interest is defined for the purposes of Regulation 6 of the NHS Procurement Regulations as including an interest of the following:

- A member of the organisation.
- A member of its committees or sub-committees or committees or sub-committees of its ICB.
- An employee.

10.3 The important things to remember are that:

- A perception of wrong doing, impaired judgement or undue influence can be as detrimental as any of them actually occurring.
- If in doubt, it is better to assume a conflict of interest and manage it appropriately rather than ignore it.



- Financial gain is not necessary for a conflict to exist.
- For the purposes of Regulation 6 of the NHS (Procurement, Patient Choice and Competition (No 2) Regulations 2013, a conflict will arise when an individual's ability to exercise judgement or act in their role in the securing of services is impaired or influenced by their interests in the provision of those services.

10.4 In line with Section 6 of the Constitution, a conflict of interest will include (but is not necessarily limited to):

- **A financial interest:** where an individual may financially benefit from the consequences of a decision (for example, as a provider of services).
- **An indirect interest:** for example, where an individual is a partner, member or shareholder in an organisation that will benefit financially from the consequences of a decision.
- **A non-financial professional interest:** where an individual holds a non-remunerative or not-for profit interest in an organisation, that will benefit from the consequences of a decision (for example, where an individual is a trustee of a voluntary provider that is bidding for a contract).
- **A non-financial personal interest:** where an individual may enjoy a qualitative benefit from the consequence of a decision which cannot be given a monetary value (for example, a reconfiguration of hospital services which might result in the closure of a busy clinic next door to an individual's house).
- Where an individual is closely related to, or in a personal or professional relationship, including friendship, with an individual in the above categories.

10.5 Examples of interests that will be deemed to be relevant and material will include but are not limited to:

- Roles and responsibilities held within local providers to the ICB.
- Ownership or part-ownership of private companies, businesses or consultancies likely or possibly seeking to do business with the ICB.
- Directorships, including non-executive Directorship held in private or public limited companies seeking to enter into contracts with the ICB.
- All shareholdings of companies in the field of health and social care seeking to enter into contracts with the ICB must be declared.



- Positions of authority in an organisation (e.g., charity or voluntary organisation) in the field of health and social care.
- Any connection with a voluntary or other organisation contracting for NHS services.
- Formal interest with a position of influence in a political party or organisation.
- If registered with the General Medical Council (GMC), any interested are required to declare in accordance with paragraph 55 of the GMC's publication 'Management for Doctors' or any successor guidance.
- If registered with the Nursing and Midwifery Council (NMC), any interested would be required to declare in accordance with paragraph 7 of the NMC's publication 'Code of Professional Conduct' or any successor Code.
- Any interest which does, or might, constitute a conflict of interest in relation to the specification for or award of any contract to provide goods or services to the ICB.
- Any research funding or grants that may be received by the individual or any organisation that they have an interest or role in.
- Any other role or relationship which the public could perceive would impair or otherwise influence the individual's judgement or actions in their role within the ICB.

## **11.0 Managing conflicts of interest in ICB activities**

11.1 Conflicts of interests may arise when the ICB engages clinicians, or other representatives of provider organisations for the purpose of advising it on its activities. These activities include:

- Pre-procurement work.
- Work during procurement; and
- Work following procurement.

11.2 The ICB acknowledges that its engagement with clinicians or representatives from partner practices, hospitals or other providers who have an interest in providing services to the ICB is likely to differ depending on which stage of the procurement process the organisation is at.



- 11.3 In managing conflicts or potential conflicts of interests, the ICB may distinguish between those individuals or organisations that have an interest and those that are deemed to have a material interest.

## 12.0 Registers of interest

- 12.1 The Senior Governance Lead, on behalf of the Conflicts of Interest Guardian, will maintain registers of all relevant and material interests and positions of influence declared by the ICB, its committees, sub committees and employees.
- 12.2 Applicants for any appointment to the ICB or its committees or sub-committees should be asked to declare any relevant interests. When an appointment is made, a formal declaration of interests should again be made and recorded.
- 12.3 All attendees at meetings should be asked to declare any interest they have in any agenda item before it is discussed or as soon as it becomes apparent. Even if an interest is declared in the register of interests, it should be declared in meetings where matters relating to that interest are discussed. Declarations of interest must be recorded in minutes.
- 12.4 Registers will be reviewed annually by the Audit Committee with an assurance report provided to the ICB, to include explanations of any concerns and how these were managed.
- 12.5 Where an individual change's role or responsibility within the ICB, any change to the individual's interests should be declared.
- 12.6 Any changes / additions to declarations which could result in a conflict / potential conflict, should be notified to the Senior Governance Lead as soon as possible after the change occurs, and, at the latest, within 28 days.
- 12.7 The Register will be published on the NHS Humber and North Yorkshire ICB's website with the exception of staff grade 7 and below who do not have a position of influence on any ICB committees or sub-committees. All information may have to be disclosed, if requested, under the Freedom of Information Act.
- 12.8 The Registers for the ICB, ICB committees, and staff (grade 8a and above) will be reviewed not less than every six months and republished as necessary.



- 12.9 Declared interests of the ICB, ICB committees, and staff (grade 8a and above) will be published on the NHS Humber and North Yorkshire ICB's website.

### **13.0 Management arrangements**

- 13.1 Full details of how declared interests should be managed are as outlined in Section 6 of the Constitution (for ease of reference see extract at Appendix 3). Examples of possible scenarios and how to manage them are included as Appendix 2.

- 13.2 Where no previous declaration has been made, the Chair of the meeting will determine how this should be managed, in line with the management arrangements and may require the individual to withdraw from the meeting or part of it. The agreed actions should be recorded in the minutes.

#### **13.3 Interests of the Chair of a Meeting**

Where the Chair of a meeting has a relevant interest, whether previously declared or not, in relation to the scheduled or likely business of the meeting, the Deputy Chair will act as Chair for the relevant part of the meeting and may require the Chair to withdraw for that part of the discussion. If there is no Deputy Chair, the meeting will select one and the meeting must ensure that arrangements for the management of the conflict of interest are followed.

#### **13.4 Effects of withdrawal**

Where 50% of members of a meeting are required to withdraw, the Chair (or Deputy) will determine whether or not the discussion can proceed. This decision will be based on whether the meeting is quorate, as set out in the terms of reference. Where a quorum cannot be convened, the Chair will consult with the Audit Committee Chair to ensure timely management of the issue. Possible actions are set out in Section 6 of the Constitution (see Appendix 3).

- 13.5 Any arrangements made or agreed in a meeting will be recorded in the minutes.

### **14.0 Declarations in relation to procurement**

- 14.1 The ICB recognises the importance in making decisions about the services it procures in a way that does not call into question the motives behind the procurement decision that has been made. This has now been put on a statutory footing in the 2013 Regulations mentioned above.

- 14.2 The ICB will publish a Procurement Policy approved by its ICB which includes specific reference to conflicts of interest. The Procurement Policy should make reference to:



- Arrangements to ensure that relevant stakeholders, together with local members of the public, are engaged in the decision-making processes used to design and redesign services.
  - Service redesign and procurement processes are conducted in an open, transparent, non-discriminatory and fair way.
- 14.3 Where a relevant and material interest or position of influence exists in the context of the specification for, or award of, a contract, the individual will be expected to:
- Declare the interest
  - Ensure that the interest is recorded in the register
  - Only take part in discussions as part of extended membership meetings to involve other major stakeholders in the service being discussed
  - Not have a vote in relation to the specification or award.
- 14.4 Individuals will be expected to declare any interest early in the procurement process if they are to be a potential bidder in that process. In addition, where someone is to be part of the tender evaluation panel or decision-making process regarding the award of the contract, any potential conflict of interest must be declared at the earliest opportunity. Failure to do so could result in the procurement process being declared invalid and possible suspension of the relevant individual from the ICB.
- 14.5 Potential conflicts will vary to some degree depending on the way in which a service is being commissioned, e.g.:
- Where an ICB is securing a service through Competitive Tender (i.e., seeking to identify the best provider or set of providers for a service) a conflict of interest may arise where providers in which ICB members have an interest are amongst those bidding.
  - Where the ICB is securing a service through Any Qualified Provider (AQP) a conflict could arise where one or more potential providers has close links with the ICB. Further guidance on the role of provider collaboratives is expected.
- 14.6 The ICB is prohibited by law from awarding any contract where the integrity of the procurement process or the award has been, or appears to have been, affected by a conflict of interest. In this context, it is likely that the ICB will wish to take specialist legal advice.



- 14.11 The ICB will also adhere to all relevant regulations and principles which pertain to NHS procurement and UK / EU competition law, including the NHS (Procurement, Patient Choice and Competition) Regulations 2013.

## 15.0 Gifts and hospitality

- 15.1 The ICB will maintain a register of gifts and hospitality and robust processes must be in place to ensure individuals do not accept gifts, hospitality or other benefits which might reasonably be seen to compromise their professional judgment or integrity.
- 15.2 The register will be reviewed by the Audit Committee at least annually with an assurance report provided annually to the ICB.
- 15.3 All individuals need to consider the risks associated with accepting gifts, hospitality, or other benefits, particularly during procurement exercises. The acceptance of gifts could give rise to real or perceived conflicts of interests or accusations of unfair influence, collusion, or canvassing.

### Gifts

- 15.4 A gift is defined as any item of cash or goods, or any service, which is provided for personal benefit free of charge or at less than its commercial value.
- 15.5 All gifts of any nature, whatever their value, offered to any member of ICB staff or committee member by a contractor or supplier (current or prospective) to the ICB's business should be declined. The person to whom the gifts were offered must declare said offer to the Senior Governance Lead for inclusion on the register. The declaration should also be signed off by the relevant line manager (see form at Appendix 5).
- 15.6 Subject to this, low cost branded promotional aids (diaries, calendars, etc.) may be accepted where they are under the value of the common industry standard of £6 in total and need not be declared.
- 15.7 The offer of gifts must be declared, even when they are declined, within 28 days of the gift being offered.
- 15.8 Gifts from other sources should also be declined if acceptance could be perceived as favoritism or bias. The only exceptions relate to low cost branded promotional aids, such as diaries, calendars, and other small gifts, which are under the value of a common industry standard of £61 in total. Gifts of this nature do not need to be declared.
- 15.9 Any personal gift of cash or cash equivalent, i.e., vouchers, tokens, remuneration to attend meetings whilst working for / representing the ICB must always be declined whatever their value and whatever their source. The person to whom the gifts were



offered must declare said offer to the [Senior Governance Lead] for inclusion on the register.

15.10 In relation to gifts from patients, families, service users, etc.:

- i) Gifts of cash and vouchers to individuals must always be declined. Staff should not accept any gifts.
- ii) Gifts valued at over £50 should be treated with caution and only be accepted on behalf of the ICB, i.e., a charitable trust, and not in a personal capacity. These should always be declared.
- iii) Modest gifts accepted under a value of £50 need not be declared. A common sense approach to the value of the gift should be applied, i.e. using the actual value if known.
- iv) Multiple gifts from the same source over a period of 12 months should be treated in the same way as a single gift over £50 where the cumulative value exceeds £50.

### **Provision of Hospitality**

15.11 NHS funds for hospitality should be used sparingly and modestly and only after each case has been carefully considered. All expenditure on these items should be capable of justification as reasonable and authorised by the relevant budget holder. Petty cash should not be used to provide hospitality.

15.12 Whenever possible meetings should be arranged within ICB premises. If this is not possible, other NHS establishments should be the preferred choice. If this is not possible the meeting should be arranged at the most economic rate, taking into account room and refreshment charges.

15.13 Meetings during the lunch period should be avoided.

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<sup>1</sup> The £6 value has been selected with reference to existing industry guidance issued by the ABPI [2021-abpi-code-of-practice.pdf \(pmcpa.org.uk\)](#) clause 10.4



## Accepting Hospitality

- 15.14 Hospitality means offers of meals, refreshments, travel, accommodation, and other expenses in relation to attendance at meetings, conferences, education and training events, etc.,
- 15.15 To be acceptable, hospitality must be secondary to the purpose of the meeting or event. The level of hospitality offered in these circumstances should be appropriate and not out of proportion to the occasion e.g., a meal during the course of an event or visit away from base. Hospitality cannot in these circumstances be extended to spouses / partners. Modest hospitality, e.g., tea / coffee, and light refreshments at meetings need not be declared. Utmost discretion should be exercised in accepting offers of hospitality from contractors or their representatives, other organisations or individuals concerned with the supply of goods or services. Individuals should be especially cautious of accepting small items of value, or hospitality over that afforded in a normal meeting environment (i.e., beverages) during a procurement process or from bidders/potential bidders. This avoids any potential claim of unfair influence, collusion, or canvassing.
- 15.16 Individuals need to be aware that accepting hospitality may compromise their strict independence and impartiality. If in doubt, advice should be sought from the line manager. Further advice is available from the Senior Governance Lead.
- 15.17 Overarching principles applying in all circumstances:
- i) Staff should not ask for, or accept, hospitality that may affect, or be seen to affect, their professional judgement.
  - ii) Hospitality must only be accepted when there is a legitimate business reason, and it is proportionate to the nature and purpose of the event.
  - iii) Particular caution must be exercised when hospitality is offered by actual, or potential, suppliers or contractors. Hospitality can, however, be accepted if modest and reasonable but individuals must always obtain senior approval and declare the hospitality on the relevant form.
- 15.18 In relation to meals and refreshments:
- i) Under a value of £25 may be accepted and need not be declared.
  - ii) Of a value between £25 - £75 may be accepted but must be declared.

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<sup>2</sup> The £75 value has been selected with reference to existing industry guidance issued by the ABPI  
<http://www.pmcpsa.org.uk/thecode/Pages/default.aspx>



- iii) Over a value of £75 must be refused unless (in extreme circumstances) senior approval is given. A clear reason for acceptance must be recorded on the ICB's gifts and hospitality register.
- iv) A common sense approach must be applied in the valuing of meals and refreshments, using the actual amount if known.

15.19 In relation to travel and accommodation:

- i) Modest offers to pay some or all of the travel and accommodation costs relating to attendance at events may be accepted but must be declared.
- ii) Offers which go beyond modest or are of a type that the ICB itself might not usually offer (i.e., foreign travel and accommodation, first class / business class travel, etc.) need senior approval and should only be accepted in exceptional circumstances and must be declared. A clear reason for acceptance must be entered onto the ICB's Gifts and Hospitality Register.

15.20 Individuals should decline all other offers of hospitality or entertainment even if they would occur in their own time. All offers of hospitality with a value of over £25 which have been accepted, must be reported on the relevant form (see Appendix 5).

15.21 Offers of funding from private companies for events (e.g., training events for clinicians), which may include the provision of hospitality, must be approved prior to acceptance. Such circumstances are covered by the separate Policy and Guidance Sponsorship (the principles of which apply to all private companies).

15.22 Commercial sponsorship for courses, conferences, funding, meetings, and publications in relation to work by committee members may be offered. If such offers are reasonably justifiable and otherwise in accordance with the statutory guidance, then they may be accepted. All such offers, whether accepted or declined, must be declared to the Senior Governance Lead for inclusion in the register.

## 16.0 Raising concerns and breaches

16.1 It is the duty of every ICB employee, ICB member and committee / sub-committee member to report genuine concerns in relation to conflicts of interest.

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<sup>3</sup> The £75 value has been selected with reference to existing industry guidance issued by the ABPI  
<http://www.pmcpsa.org.uk/thecode/Pages/default.aspx>



16.2 In the first instance, suspected or actual breaches of the ICB's conflicts of interest policy should be raised with the Conflicts of Interest Guardian. All such notifications will be treated in the strictest confidence.

16.3 ICB staff and other individuals should also report any concerns to the NHS Fraud and Corruption Reporting Line on 0800 028 40 60.

### **17.0 Policy implementation**

17.1 Following approval by the ICB, this policy will be distributed by the Communications Manager to staff, the ICB, its committee and sub-committee Members.

17.2 The policy will be published on the ICB's website.

### **18.0 Training and awareness**

18.1 Notice of all approved policies placed on the website will be included in ICB briefing processes. The policy will be brought to the attention of all new Members and staff via the induction process. Advice on this policy can be obtained from the Chair of the Audit Committee or the Senior Governance Lead.

18.2 NHS England & NHS Improvement will provide mandatory online conflicts of interest training. All ICB staff will be required to evidence completion of the mandated training on an annual basis, by 31 January each year.

### **19.0 Monitoring and audit**

19.1 The Audit Committee will:

- Keep the arrangements for the management of conflicts of interest under review
- Annually review the registers of interest
- Provide an annual assurance report to the ICB

19.2 Monitoring of this policy may form part of the Internal Audit review of governance compliance.

19.3 The ICB is required to include an annual audit of conflicts of interest management within their internal audit plans and to publish the internal audit findings within their annual end-of-year governance statement.

### **20.0 Policy review**

20.1 This policy will be reviewed annually. Earlier review may be required in response to exceptional circumstances, organisational change, or relevant changes in



legislation / guidance, as instructed by the senior manager responsible for this policy.

- 20.2 This policy, once approved, will be shared with all staff, and published on the internet. A briefing will be provided to support this dissemination.
- 20.3 Breaches of this policy may be investigated and may result in the matter being treated as a disciplinary offence under the ICB's disciplinary procedure.

## 21.0 References

- Managing Conflicts of Interest in ICBs – NHS Federation & RCGP Centre for Commissioning
- Managing Conflicts of Interest: Revised Statutory Guidance– NHS England – June 2017
- NHS England- Managing conflicts of interest where GP practices are potential providers of ICB-commissioned services
- Best Practice Update on Conflicts of Interest Management – Call to Action for ICBs February 2019
- BMA's Ensuring Transparency & Probity Guidance
- NHS Wirral Commissioning/Procurement of Health Services Appendix D – Approvals Process
- Section 14O of the National Health Service Act 2006, as inserted by section 25 of the 2012 Act
- The NHS (Procurement, Patient Choice and Competition) (No 2) Regulations 2013 (SI 2013 No 500)
- Public Contracts Regulations 2006
- Towards Establishment: Creating responsive and accountable ICBs together with Technical Appendix 1 – Managing conflicts of interest (NHS Commissioning Board February 2012)
- Bribery Act 2010
- Policy on Business Conduct & Management of Conflicts of Interest – template for ICBs developed by Internal Auditor, North Yorkshire
- The Seven Principles of Public Life (commonly known as the Nolan Principles)
- The Good Governance Standards of Public Services
- The Seven Key Principles of the NHS Constitution



## **22.0 Associated policies**

- Constitution
- Code of Conduct and Behaviours Policy
- Sponsorship Policy
- Whistleblowing Policy
- Local Anti-Fraud, Bribery and Corruption Policy
- Procurement Policy
- Induction Policy

## **23.0 Contact details**

Senior Governance Lead – Mike Napier [michael.napier@nhs.net](mailto:michael.napier@nhs.net)

Queries can also be directed via [hnyicb-hull.hnycorporateaffairsenquiries@nhs.net](mailto:hnyicb-hull.hnycorporateaffairsenquiries@nhs.net)

## Appendix 1 - EQUALITY IMPACT ANALYSIS

1.	<p><b>What evidence do you have of any potential adverse or positive impact on groups with protected characteristics, or other groups identified as vulnerable below?</b>  <b>Do you have any gaps in information?</b>  <b>Include any supporting evidence e.g. research, data or feedback from engagement activities</b>  <b>List any mitigations available where adverse impacts are found.</b></p>
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Characteristic	Impact
<p><b>Disability</b>            People who have physical disabilities, learning disabilities, people with mental illness, sensory loss and long-term chronic conditions (such as diabetes, HIV)</p> <p><b>Mitigations:</b> N/A</p>	No evidence of impact.
<p><b>Sex</b>            Men and Women</p> <p><b>Mitigations:</b></p>	No evidence of impact.
<p><b>Race or nationality</b>            People of different ethnic backgrounds, including Roma Gypsies and Travellers</p> <p><b>Mitigations:</b> N/A</p>	No evidence of impact.
<p><b>Age</b>            This applies to all age groups. This can include safeguarding, consent and child welfare</p> <p><b>Mitigations:</b> N/A</p>	No evidence of impact.
<p><b>Transgender status</b>            People who have undergone gender reassignment (sex change) and those who identify as trans</p> <p><b>Mitigations:</b></p>	No evidence of impact.

<b>Sexual orientation</b> This will include lesbian, gay and bi-sexual people as well as heterosexual people.	No evidence of impact.
<b>Mitigations:</b> N/A	
<b>Religion or belief</b> Includes religions, beliefs or no religion or belief	No evidence of impact.
<b>Mitigations:</b> N/A	
<b>Marriage and Civil Partnership</b> Refers to legally recognised partnerships (employment policies only)	No evidence of impact.
<b>Mitigations:</b> N/A	
<b>Pregnancy and maternity</b> Refers to the pregnancy period and the first year after birth	No evidence of impact.
<b>Mitigations:</b> N/A	
<b>Carers</b> This relates to general caring responsibilities for someone of any age.	No evidence of impact.
<b>Mitigations:</b> N/A	
<b>Other disadvantaged groups</b> This relates to groups experiencing health inequalities such as people living in deprived areas, new migrants, people who are homeless, ex-offenders.	No evidence of impact.
<b>Mitigations:</b> N/A	
<b>Sign off</b>	
<b>Name and signature of person / team who carried out this analysis</b>	
<b>Date analysis completed</b>	
<b>Name and signature of responsible Director</b>	
<b>Date analysis was approved by responsible Director</b>	

## Appendix 2 – ICB BUSINESS CYCLE AND POTENTIAL CONFLICTS OF INTEREST

### Notes:

- The illustrations given below should not be considered to be prescriptive in every instance.
- These are guidelines and both the materiality of the conflict and the significance of the issue should be considered carefully by the Chair in deciding on how to manage the conflict.
- It is the responsibility of the Chair to review the agenda and operate caution in terms of deferment or referral if necessary.
- Chairs to also consider potential conflicts of interest arising from verbal reports.
- Links should be considered to strategy direction e.g., is the introduction of a LES in line with the strategy?
- If significant/complete conflict of interest at a locality level the matter could be referred to the ICB for decision.

Interest	Financial (Self, partner or close associate)	Personal (Self)	Personal (Partner or close)	Competing Loyalties
Needs assessment	Fully participate	Fully participate	Fully participate	Fully participate
Decide priorities	Discuss but cannot vote	Discuss and vote	Discuss and vote	Discuss and vote
Review service proposals	Remain but cannot speak or vote	Remain but cannot speak or vote	Remain but cannot speak or vote	Discuss and vote
Design services (ensure a fully inclusive process)	Discuss and vote	Discuss and vote	Discuss and vote	Discuss and vote
Review prioritised business cases	Leave the room	Remain but cannot speak or vote (unless interest is deemed not prejudicial)	Remain but cannot speak or vote (unless interest is deemed not prejudicial)	Discuss and vote
Procurement/contracting	Leave the room	Remain but cannot speak or vote (unless interest is deemed not prejudicial)	Remain but cannot speak or vote (unless interest is deemed not)	Discuss and vote
Performance Management	Remain but cannot speak or vote (unless significant and then leave the room)	Remain but cannot speak or vote (unless significant and then leave the room)	Remain but cannot speak or vote (unless significant and then leave the room)	Discuss and vote
Review Health Outcomes	Fully participate	Fully participate	Fully participate	Fully participate

## **Appendix 3 - EXTRACT FROM NHS HUMBER AND NORTH YORKSHIRE ICB CONSTITUTION - SECTION 6 MANAGING CONFLICTS OF INTEREST**

### **6.0 Arrangements for Conflict of Interest Management and Code of Conduct and Behaviours**

#### **6.1 Conflicts of Interest**

- 6.1.1** As required by section 14Z30 of the 2006 Act, the ICB has made arrangements to manage any actual and potential conflicts of interest to ensure that decisions made by the ICB will be taken and seen to be taken without being unduly influenced by external or private interest and do not, (and do not risk appearing to) affect the integrity of the ICB's decision-making processes.
- 6.1.2** The ICB has agreed policies and procedures for the identification and management of conflicts of interest which are published on the website at (hyperlink to relevant section of ICS website be provided here)
- 6.1.3** All Board, committee and sub-committee members, and employees of the ICB, will comply with the ICB policy on conflicts of interest in line with their terms of office and/ or employment. This will include but not be limited to declaring all interests on a register that will be maintained by the ICB.
- 6.1.4** All delegation arrangements made by the ICB under Section 65Z5 of the 2006 Act will include a requirement for transparent identification and management of interests and any potential conflicts in accordance with suitable policies and procedures comparable with those of the ICB.
- 6.1.5** Where an individual, including any individual directly involved with the business or decision-making of the ICB and not otherwise covered by one of the categories above, has an interest, or becomes aware of an interest which could lead to a conflict of interests in the event of the ICB considering an action or decision in relation to that interest, that must be considered as a potential conflict, and is subject to the provisions of this Constitution, the Conflicts of Interest Policy and the Code of Conduct and Behaviours Policy.
- 6.1.6** The ICB has appointed the Audit Chair to be the Conflicts of Interest Guardian. In collaboration with the ICB Director / Senior Manager with responsibility for governance, their role is to:
- a) Act as a conduit for members of the public and members of the partnership who have any concerns with regards to conflicts of interest.
  - b) Be a safe point of contact for employees or workers to raise any concerns in relation to conflicts of interest.
  - c) Support the rigorous application of conflict of interest principles and policies.
  - d) Provide independent advice and judgment to staff and members where there is any doubt about how to apply conflicts of interest policies and principles in an individual situation.
  - e) Provide advice on minimising the risks of conflicts of interest.

## **6.2 Principles**

**6.2.1** In discharging our functions the ICB will abide by the following principles (in accordance with the Nolan Principles for public life):

- a) Selflessness – holders of public office will act solely in terms of the public interest.
- b) Integrity – holders of public office will avoid placing themselves under any obligation to people or organisations that might try inappropriately to influence them in their work. They will not act or take decisions in order to gain financial or other material benefits for themselves, their family, or their friends. They will declare and resolve any interests and relationships.
- c) Objectivity – holders of public office will act and take decisions impartially, fairly and on merit, using the best evidence and without discrimination or bias.
- d) Accountability – holders of public office are accountable to the public for their decisions and actions and must submit themselves to the scrutiny necessary to ensure this.
- e) Openness – holders of public office will act and take decisions in an open and transparent manner. Information should not be withheld from the public unless there are clear and lawful reasons for so doing.
- f) Honesty – holders of public office will be truthful.
- g) Leadership – holders of public office will exhibit these principles in their own
- h) behaviour. They will actively promote and robustly support the principles and be willing to challenge poor behaviour wherever it occurs.

## **6.3 Declaring and Registering Interests**

**6.3.1** The ICB maintains registers of the interests of:

- a) Members of the ICB
- b) Members of the Board's committees and sub-committees
- c) Its employees

**6.3.2** In accordance with section 14Z30(2) of the 2006 Act registers of interest are published on the ICB website at <https://humberandnorthyorkshire.icb.nhs.uk/>

**6.3.3** All relevant persons as per 6.1.3 and 6.1.5 must declare any conflict or potential conflict of interest relating to decisions to be made in the exercise of the ICB's functions.

**6.3.4** Declarations should be made as soon as reasonably practicable after the person becomes aware of the conflict or potential conflict and in any event within 28 days. This could include interests an individual is pursuing. Interests will also be

declared on appointment and during relevant discussion in meetings.

- 6.3.5** All declarations will be entered in the registers as per 6.3.1
- 6.3.6** The ICB will ensure that, as a matter of course, declarations of interest are made and confirmed or updated at least annually.
- 6.3.7** Interests (including gifts and hospitality) of decision-making staff will remain on the public register for a minimum of six months. In addition, the ICB will retain a record of historic interests and offers/receipt of gifts and hospitality for a minimum of six years after the date on which it expired. The ICB's published register of interest's states that historic interests are retained by the ICB for the specified timeframe and details of whom to contact to submit a request for this information.
- 6.3.8** Activities funded in whole or in part by third parties who may have an interest in ICB business such as sponsored events, posts and research will be managed in accordance with the ICB policy to ensure transparency and that any potential for conflicts of interest are well-managed.

#### **6.4 Code of Conduct and Behaviours**

- 6.4.1** Board members, employees, committee and sub-committee members of the ICB will at all times comply with this Constitution and be aware of their responsibilities as outlined in it. They should:
  - a) act in good faith and in the interests of the ICB.
  - b) follow the Seven Principles of Public Life; set out by the Committee on Standards in Public Life (the Nolan Principles).
  - c) comply with the ICB Standards of Business Conduct Policy, and any requirements set out in the policy for managing conflicts of interest.
- 6.4.2** Individuals contracted to work on behalf of the ICB or otherwise providing services or facilities to the ICB will be made aware of their obligation to declare conflicts or potential conflicts of interest. This requirement will be written into their contract for services and is also outlined in the ICB's Code of Conduct and Behaviours policy.

## Appendix 4 - RECORDING DECLARATIONS OF INTEREST IN MINUTES

### ATTENDANCE

Name                      Initials                      Role

Item No.	Agenda Item	Actions
1	Chairs welcome	
2	Apologies for absence <apologies to be noted>	
3	<p><b>Declarations of interest</b></p> <p>Committee members were reminded of their obligation to declare any interest that they may have on any issues arising at committee meetings which might conflict with the business of NHS Humber and North Yorkshire ICB.</p> <p><b>Declarations of interest from sub-committees</b></p> <p><b>Declarations of interest from today's meeting</b></p> <p>The following Declaration of Interest update was received at the meeting:</p> <p>Mitigations agreed:</p> <p>The quoracy of the meeting was reviewed and it was established that the meeting remained/ did not remain quorate.</p>	
4	<b>Minutes of the last meeting &lt;date to be inserted&gt; and matters arising</b>	
	<p><b>Agenda Item &lt;note the agenda item&gt;</b></p> <p>Details of any action taken in respect of updated declaration(s).</p> <p>&lt;conclude decision has been made&gt;</p> <p>&lt;note the agenda item XX&gt;</p>	
6	<b>Any other business</b>	
7	<b>Date and time of next the meeting</b>	



**Appendix 5 - DECLARATIONS OF GIFTS AND HOSPITALITY FORM**

**Gifts:**

Contractors and Suppliers: All gifts of any nature, whatever their value, offered to any member of ICB staff or committee member or GP member practice staff by a contractor or supplier (current or prospective) to the ICB’s business should be declined. The person to whom the gifts were offered must declare said offer to the [Senior Governance Lead] for inclusion on the register.

Subject to this, low cost branded promotional aids (diaries, calendars, etc.) may be accepted where they are under the value of the common industry standard of £6 in total and need not be declared.

From patients and other sources: seek advice from the [Senior Governance Lead]

**Hospitality:**

- Under a value of £25 may be accepted and need not be declared.
- Of a value between £25 - £75 may be accepted but must be declared.
- Over a value of £75 must be refused unless (in extreme circumstances) senior approval is given. A clear reason for acceptance must be recorded on the ICB’s gifts and hospitality register.
- A common sense approach must be applied in the valuing of meals and refreshments, using the actual amount if known.

Recipient Name:	
Position:	
Date of Offer:	
Date of Receipt (if applicable):	
Details of Gift / Hospitality:	
Estimated Value:	
Supplier / Offeror Name and Nature of Business:	
Details of Previous Offers or Acceptance by this Offeror / Supplier:	
Details of the Officer Reviewing and Approving the Declaration Made and Date:	
Declined or Accepted?	



Reason for Declining or Accepting:	
Other Comments:	

I confirm that the information provided above is complete and correct. I acknowledged that any changes in these declarations must be notified to the ICB as soon as practicable and no later than 28 days after the interest arises. I am aware that if I do not make full, accurate and timely declarations then civil, criminal, professional regulatory or internal disciplinary action may result.

*The information submitted will be held by the ICB for personnel or other reasons specified on this form and to comply with the organisation's policies. This information may be held in both manual and electronic form in accordance with the Data Protection Act 1998. Information may be disclosed to third parties in accordance with the Freedom of Information Act 2000 and published in registers that the ICB holds.*

I do / do not (*delete as applicable*) give my consent for this information to be published on registers that the ICB holds. If consent is NOT given, please give reasons:

	Name	Position	Date
Signed By:			
Senior/Line Manager			

**Please return completed form to the Senior Governance Lead**

## **Appendix 6 - MANAGEMENT OF BREACHES OF THE CONFLICTS OF INTEREST POLICY**

- 1 It is the duty of each individual (ICB employee, ICB member, committee or sub-committee member) to speak up about genuine concerns in relation to the administration of the ICB's policy on Conflicts of Interest management. If an individual has any such concerns, they should not ignore such suspicions or investigate the matter themselves.
- 2 Any NHS Humber and North Yorkshire ICB employee, ICB member, committee or sub-committee member should also refer to the ICB's Whistleblowing Policy which can be found on the ICB's website at [humberandnorthyorkshire.icb](http://humberandnorthyorkshire.icb)
- 3 Concerns about the management of Conflicts of Interest should be raised with the Senior Governance Lead and / or the Conflicts of Interest Guardian.
- 4 When raising a concern, the individual must advise whether they wish to remain anonymous whilst the concern is being investigated.
- 5 If someone has any particular concerns as to confidentiality, they may raise the matter solely with the Conflicts of Interest Guardian who, in the first instance, will discuss the matter with the individual and consider how to retain confidentiality.
- 6 The concern will be investigated by the Conflicts of Interest Guardian and the Governance Lead. The individual raising the concern will be asked to provide details. The Conflicts of Interest Guardian and Governance Lead will consider the concern and take further steps to investigate the concern.
- 7 The individual raising the concern will be kept informed of any decisions taken as a result of any investigation.
- 8 The decision on the outcome of the investigation will be made by the Senior Governance Lead. In the event that a breach of this policy is identified, the Senior Governance Lead will consider whether any further action is required, taking all of the details of the concern and this policy into consideration.
- 9 All concerns raised will be reported to the Audit Committee who will receive updates as the investigation progresses and be notified of the final outcome of the investigation. Any breaches identified and any action taken will be reported to the Audit Committee.
- 10 Where a breach is identified, the Senior Governance Lead will be responsible for reporting the breach to NHS England. A confidential record of the breach will be retained by the Senior Governance Lead.
- 11 An anonymised record of any breaches of this policy will be made available on the ICB's website.
- 12 Providers, patients and other third parties can make a complaint to NHS England at: [NHS England](http://NHS England) in relation to a commissioner's conduct under the Procurement Patient Choice and Competition Regulations.

**Breaches of ICB's Conflicts of Interest Policy**

Details of the Breach	Date Breach Identified	How the Breach was Managed	Learning / Improvements Made Following the Breach	Date NHS England Informed of the Breach



**Appendix 7 - FLOWCHART FOR PROCESSING CONFLICT OF INTEREST BREACHES**

